



August 4, 2003

Dear Hospice Providers:

The Department is identifying problems that are caused by providers who fail to follow the procedures outlined in Part II Policies and Procedures for Hospice Services. Failure to follow the procedures may prevent the lock-in of hospice patients, the Department from reimbursing you or other providers in a timely manner and prevent dispensing of needed medications when patients revoke or discharge from hospice. To avoid these problems it is imperative that:

1. Election (579), Revocation, Discharge and all other Medicaid hospice forms require specific information (ie, Social Security number, Medicaid/ Medicare number, member signature, date and other pertinent information). Chapter 700 (Eligibility Requirements) outlines the information that must be applied to each required form. Failure to provide all pertinent information on the forms will cause them to be returned to your agency for corrections.
2. The DFCS office where the individual applied must be notified via a Hospice Care Communicator form whenever a change occurs in the individual's status (discharge, transfer, revocation, election). If you do not communicate to DFCS that a person has elected hospice, DFCS will not know to enter a patient liability amount. The claim will deny until the patient liability amount is entered. **Do not** send the Hospice Care Communicator forms to the Department of Community Health (DCH) or Georgia Health Partnership (GHP). Review section 710 of the Hospice policy manual for more detailed information.

Please review this notice and the sections in the policy that were cited with members of your staff. Following the procedures will make a difference in when and if your agency is reimbursed for the services that you provide. Contact Rosenita Brown, Program Director for Community Service Programs at (404) 657-5463 if you have any questions regarding the details of this banner message.